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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/683,952
	Filing Date	October 9, 2003
	First Named Inventor	Sherrill
	Art Unit	1623
	Examiner Name	Michael C. Henry
Total Number of Pages in This Submission	Attorney Docket Number	010072.02

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Supplemental Application Data Sheet <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) listed below: Postcard Reference
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name			
Signature			
Printed name	Yuan Chao		
Date	March 28, 2005	Reg. No.	32,118

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Nancy Impey	Date	March 28, 2005

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PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Appl'n of: Sherrill *et al.*

Att'y Ref. No.: 010072.02

Appl'n No.: 10/683,952

Filed: Oct. 9, 2003

Group Art Unit: 1623

Examiner: Michael C. Henry

Title: THERAPEUTIC FORMULATIONS

Mailing Address: Kosan Biosciences, Inc.  
3832 Bay Center Place  
Hayward, CA 94545

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This Supplemental Information Disclosure Statement ("SIDS") is submitted to the Patent Office in accordance with the duty of candor and good faith under 37 CFR §1.56. The Examiner is requested to consider the cited information in the examination of this application.

The cited information is listed in the accompanying list, submitted in duplicate. Each item of information is identified there by a unique cite number (A01, A02, ..., etc.) The Examiner is requested to return an initialed and signed copy of the list, indicating whether each item of cited information has been considered or not.

Copies of US patents and published applications are not being furnished with this SIDS, in accordance with the revisions to 37 CFR §1.98(2) as announced in the Federal Register, vol. 69, no. 182, pp. 56482-56547 (Sep. 21, 2004). If the Examiner should need copies of any of such patents or patent applications, they will be provided upon request.

**CERTIFICATE OF MAILING UNDER 37 CFR §1.8**

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Name of person signing certificate:

Nancy Impey

Signature:

Nancy Impey

Date:

3/28/2005

Each item of information in this SIDS was cited in the Search Report for a PCT counterpart of this application (PCT application no. PCT/US2004/33339) not more than three months prior to the filing of this SIDS. A copy of the Search Report, bearing a mailing date of 16 February 2005, is enclosed.

In addition to the items disclosed in this SIDS, the PCT Search Report also cited Hofmann *et al.*, US 6,194,181 B1, already of record.

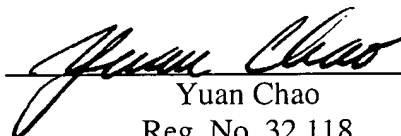
It is believed that no fee is required in connection with this SIDS. However, in the event a fee is required, the Commissioner is authorized to charge such fee (including but not limited to any fee(s) that might be required under 37 C.F.R. §§1.16, 1.17, or 1.18) against Deposit Account No. 50-2544.

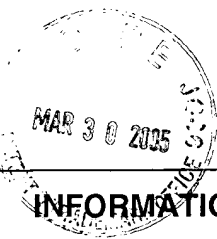
The citation of a particular item of information is not intended to be, and should not be construed as, an admission that such item of information is material to patentability as defined in 37 CFR §1.56 or qualifies as "prior art" within the meaning of applicable law. The materiality and "prior art" status of any item of information is a matter to be resolved during examination.

Consideration of the cited information in the examination of this application is respectfully requested.

Respectfully submitted,

Mar. 28, 2005  
Date

  
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**INFORMATION DISCLOSURE STATEMENT**  
**IN AN APPLICATION:**  
**LIST OF ART CITED**

<i>Docket No.</i> 010072.02	<i>Application Number:</i> 10/683,952
<i>First Named Applicant:</i> Michael J. Sherrill	
<i>Filing Date:</i> Oct. 9, 2003	<i>Group Art Unit:</i> 1623

**US PATENTS AND PUBLISHED APPLICATIONS**

Examiner Initial	Item No.	Document Number	Issue or Publication Date	Name	Cited at (if cited in specification)
	A01	US 6,380,227 B1	Apr. 30, 2002	Mutz	
	A02	US 6,380,395 B1	Apr. 30, 2002	Vite <i>et al.</i>	

**US UNPUBLISHED APPLICATIONS**

Examiner Initial	Item No.	Document Number	Filing Date	Name	Cited at (if cited in specification)

**FOREIGN PATENT DOCUMENTS**

Examiner Initial	Item No.	Document Number	Date	Country	Translation enclosed?	Cited at (if cited in specification)

**OTHER DOCUMENTS** (*Author, Title, Date, Pertinent Pages, etc.*)

Examiner Initial	Item No.	Details of Document	Translation enclosed?	Cited at (if cited in specification)

\*\*\*\* END OF LIST \*\*\*\*

<i>Examiner</i>	<i>Date considered</i>
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**EXAMINER:** Please initial if citation considered, whether or not citation is in conformance with MPEP §609. Draw line through citation if not in conformance and not considered. Please include copy of this form with next communication to the applicant.